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| UTILITY<br>PATENT APPLICATION<br>TRANSMITTAL | Attorney Docket No.:    | D3056A   |
|  | First Inventor:         | Jon Claude Russell Bennett                     |
|  | Title:                  | METHOD AND APPARATUS FOR TESTING AN IP NETWORK |
|  | Express Mail Label No.: | ER 195969943 US                                |

(Only for new nonprovisional applications under 37 CFR 1.53(b))

|  |   |
|--|---|
| APPLICATION ELEMENTS<br>(see MPEP chapter 600 concerning utility patent application contents)  | ADDRESS TO: Assistant Commissioner for Patents<br>Box Patent Application<br>Washington, D.C. 20231  |
| 1. <input checked="" type="checkbox"/> Fee Transmittal Form in duplicate<br>(Submit an original and a duplicate for fee processing)<br>2. <input type="checkbox"/> Applicant claims small entity status<br>See 37 CFR 1.27<br>3. <input checked="" type="checkbox"/> Specification Total Pages <input type="text" value="58"/><br>(preferred arrangement set forth below)<br>-Descriptive title of the invention<br>-Cross Reference to Related Applications<br>-Statement Regarding Fed sponsored R&D<br>-Reference to sequence listing, a table,<br>-Background of the Invention<br>-Brief Summary of the Invention<br>-Brief Description of the Drawings (if filed)<br>-Detailed Description<br>-Claim(s)<br>-Abstract of the Disclosure<br>4. <input checked="" type="checkbox"/> Drawing(s) Total Sheets <input type="text" value="12"/><br>5. Oath or Declaration<br>a. <input checked="" type="checkbox"/> Newly executed (original or copy)<br>b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) (for continuation/ divisional with Box 18 completed)<br>i. <input type="checkbox"/> DELETION OF INVENTOR(S)<br>Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).<br>6. <input type="checkbox"/> Application Data Sheet under 37 CFR 1.76 | 7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)<br>8. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence (if applicable, all necessary)<br>a. <input type="checkbox"/> Computer Readable Form (CFR)<br>b. <input type="checkbox"/> Specification Sequence Listing on:<br>i. <input type="checkbox"/> CD-ROM or CD-4 (2 copies);<br>ii. <input type="checkbox"/> or paper<br>c. <input type="checkbox"/> Statements verifying identify of above copies<br>ACCOMPANYING APPLICATION PARTS<br>9. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s))<br>10. <input type="checkbox"/> 37 CFR 3.73(b) <input checked="" type="checkbox"/> Power of Attorney Statement (when there is an assignee)<br>11. <input type="checkbox"/> English Translation Document (if applicable)<br>12. <input type="checkbox"/> IDS <input type="checkbox"/> Copies of IDS Citations<br>13. <input type="checkbox"/> Preliminary Amendment<br>14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503)<br>15. <input type="checkbox"/> Certified Copy of Priority Document<br>16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122(b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.<br>17. <input type="checkbox"/> Other: _____ |

18. IF A CONTINUING APPLICATION, check appropriate box and supply the requisite information below and in a preliminary amendment:

☐ Continuation ☐ Divisional ☐ Continuation-in- Part (CIP) Prior Appl. No.

Prior Appl. information: Examiner: \_\_\_\_\_ Group/Art Unit: \_\_\_\_\_

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

|  |  |                        |  |  |  |              |  |
|--|--|------------------------|--|--|--|--------------|--|
| 19. CORRESPONDENCE ADDRESS   |  |                        |  |  |  |              |  |
| <input checked="" type="checkbox"/> Customer Number or Bar Code Label <input type="text" value="27774"/> |  |                        |  | or <input type="checkbox"/> Correspondence address below |  |              |  |
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| SIGNATURE <i>Karin L. Williams</i>   |  |                        |  | Date <input type="text" value="8/21/03"/>                |  |              |  |

22388 U.S. PTO  
10/648724  
08/25/03

D3056A

08/25/03

13049 U.S. PTO

# FEE TRANSMITTAL


Patent fees are subject to annual revision

## Complete if Known

|                         |  |                            |  |
|-------------------------|--|----------------------------|--|
| Application Number      |  | Unassigned                 |  |
| Filing Date             |  | Filed Herewith             |  |
| First Named Inventor    |  | Jon Claude Russell Bennett |  |
| Examiner Name           |  | Unassigned                 |  |
| Group Art Unit          |  | Unassigned                 |  |
| TOTAL AMOUNT OF PAYMENT |  | (\$)790                    |  |
| Attorney Docket No.     |  | D3056A                     |  |

| METHOD OF PAYMENT   |                   |                |                 | FEE CALCULATION (continued)   |                   |                |                 |                 |          |              |     |                 |     |                    |       |     |                                     |     |                    |                   |    |                                     |       |                |                 |                  |                           |                 |      |     |      |   |                        |      |     |      |  |                                   |       |                     |       |   |                                       |     |                 |     |  |   |     |     |     |   |   |                     |     |     |  |     |               |     |     |   |     |      |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |      |     |      |   |     |     |     |    |                                  |     |      |     |     |                                    |     |      |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |                   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |                           |  |  |  |  |
|---|-------------------|----------------|-----------------|---|-------------------|----------------|-----------------|-----------------|----------|--------------|-----|-----------------|-----|--------------------|-------|-----|-------------------------------------|-----|--------------------|-------------------|----|-------------------------------------|-------|----------------|-----------------|------------------|---------------------------|-----------------|------|-----|------|---|------------------------|------|-----|------|--|-----------------------------------|-------|---------------------|-------|---|---------------------------------------|-----|-----------------|-----|--|---|-----|-----|-----|---|---|---------------------|-----|-----|--|-----|---------------|-----|-----|---|-----|------|-----|-----|--|-----|-----|-----|-----|------------------|-----|-----|-----|-----|--|-----|-----|-----|-----|--------------------------|-----|------|-----|------|---|-----|-----|-----|----|----------------------------------|-----|------|-----|-----|------------------------------------|-----|------|-----|-----|--------------------------------|-----|-----|-----|-----|------------------|-----|-----|-----|-----|-----------------|-----|-----|-----|-----|-------------------------------|-----|----|-----|----|-------------------------------------|-----|-----|-----|-----|-------------------|-----|----|-----|----|--|-----|-----|-----|-----|---|-----|-----|-----|-----|--|-----|-----|-----|-----|---|-----|-----|-----|-----|---|---------------------------|--|--|--|--|
| 1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any overpayment to:<br>Deposit Account Number <u>50-1047</u><br>Deposit Account Name <u>Mayer Fortkort &amp; Williams, PC.</u><br><input checked="" type="checkbox"/> Charge Any Additional Fee required under 37 CFR 1.16 and 1.17<br><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27  |                   |                |                 | 3. ADDITIONAL FEES<br><table border="1"> <thead> <tr> <th>Large Entity</th> <th>Fee</th> <th>Small Entity</th> <th>Fee</th> <th>Fee Description</th> </tr> </thead> <tbody> <tr><td>105</td><td>130</td><td>205</td><td>65</td><td>Surcharge - late filing fee or oath</td></tr> <tr><td>127</td><td>50</td><td>227</td><td>25</td><td>Surcharge - late Provisional filing</td></tr> <tr><td>139</td><td>130</td><td>139</td><td>130</td><td>Non-English specification</td></tr> <tr><td>147</td><td>2520</td><td>147</td><td>2520</td><td>For filing a request for ex parte Reexamination</td></tr> <tr><td>112</td><td>920*</td><td>112</td><td>920*</td><td>Requesting publication of SIR prior to Examiner action</td></tr> <tr><td>113</td><td>1840*</td><td>113</td><td>1840*</td><td>Requesting publication of SIR after Examiner action</td></tr> <tr><td>115</td><td>110</td><td>215</td><td>55</td><td>Extension for reply within first month</td></tr> <tr><td>116</td><td>400</td><td>216</td><td>200</td><td>Extension for reply within second month</td></tr> <tr><td>117</td><td>920</td><td>217</td><td>460</td><td>Extension for reply within third month</td></tr> <tr><td>118</td><td>1440</td><td>218</td><td>720</td><td>Extension for reply within fourth month</td></tr> <tr><td>128</td><td>1960</td><td>228</td><td>980</td><td>Extension for reply within fifth month</td></tr> <tr><td>119</td><td>320</td><td>219</td><td>160</td><td>Notice of Appeal</td></tr> <tr><td>120</td><td>320</td><td>220</td><td>160</td><td>Filing a brief in support of an appeal</td></tr> <tr><td>121</td><td>280</td><td>221</td><td>140</td><td>Request for oral hearing</td></tr> <tr><td>138</td><td>1510</td><td>138</td><td>1510</td><td>Petition to institute a public use proceeding</td></tr> <tr><td>140</td><td>110</td><td>240</td><td>55</td><td>Petition to revive - unavoidable</td></tr> <tr><td>141</td><td>1280</td><td>241</td><td>640</td><td>Petition to revive - unintentional</td></tr> <tr><td>142</td><td>1280</td><td>242</td><td>640</td><td>Utility issue fee (or reissue)</td></tr> <tr><td>143</td><td>460</td><td>243</td><td>230</td><td>Design issue fee</td></tr> <tr><td>144</td><td>620</td><td>244</td><td>310</td><td>Plant issue fee</td></tr> <tr><td>122</td><td>130</td><td>122</td><td>130</td><td>Petitions to the Commissioner</td></tr> <tr><td>123</td><td>50</td><td>123</td><td>50</td><td>Processing fee under 37 CFR 1.17(q)</td></tr> <tr><td>126</td><td>180</td><td>126</td><td>180</td><td>Submission of IDS</td></tr> <tr><td>581</td><td>40</td><td>581</td><td>40</td><td>Recording each patent assignment per property (times number of properties)</td></tr> <tr><td>146</td><td>740</td><td>246</td><td>370</td><td>Filing a submission after final rejection (37 CFR § 1.129(a))</td></tr> <tr><td>149</td><td>740</td><td>249</td><td>370</td><td>For each additional invention to be examined (37 CFR § 1.129(b))</td></tr> <tr><td>179</td><td>740</td><td>279</td><td>370</td><td>Request for Continued Examination (RCE)</td></tr> <tr><td>169</td><td>900</td><td>169</td><td>900</td><td>Request for expedited examination of a design application</td></tr> <tr><td colspan="5">Other fee (specify) _____</td></tr> </tbody> </table> |                   |                |                 | Large Entity    | Fee      | Small Entity | Fee | Fee Description | 105 | 130                | 205   | 65  | Surcharge - late filing fee or oath | 127 | 50                 | 227               | 25 | Surcharge - late Provisional filing | 139   | 130            | 139             | 130              | Non-English specification | 147             | 2520 | 147 | 2520 | For filing a request for ex parte Reexamination | 112                    | 920* | 112 | 920* | Requesting publication of SIR prior to Examiner action | 113                               | 1840* | 113                 | 1840* | Requesting publication of SIR after Examiner action | 115                                   | 110 | 215             | 55  | Extension for reply within first month | 116   | 400 | 216 | 200 | Extension for reply within second month | 117   | 920                 | 217 | 460 | Extension for reply within third month | 118 | 1440          | 218 | 720 | Extension for reply within fourth month | 128 | 1960 | 228 | 980 | Extension for reply within fifth month | 119 | 320 | 219 | 160 | Notice of Appeal | 120 | 320 | 220 | 160 | Filing a brief in support of an appeal | 121 | 280 | 221 | 140 | Request for oral hearing | 138 | 1510 | 138 | 1510 | Petition to institute a public use proceeding | 140 | 110 | 240 | 55 | Petition to revive - unavoidable | 141 | 1280 | 241 | 640 | Petition to revive - unintentional | 142 | 1280 | 242 | 640 | Utility issue fee (or reissue) | 143 | 460 | 243 | 230 | Design issue fee | 144 | 620 | 244 | 310 | Plant issue fee | 122 | 130 | 122 | 130 | Petitions to the Commissioner | 123 | 50 | 123 | 50 | Processing fee under 37 CFR 1.17(q) | 126 | 180 | 126 | 180 | Submission of IDS | 581 | 40 | 581 | 40 | Recording each patent assignment per property (times number of properties) | 146 | 740 | 246 | 370 | Filing a submission after final rejection (37 CFR § 1.129(a)) | 149 | 740 | 249 | 370 | For each additional invention to be examined (37 CFR § 1.129(b)) | 179 | 740 | 279 | 370 | Request for Continued Examination (RCE) | 169 | 900 | 169 | 900 | Request for expedited examination of a design application | Other fee (specify) _____ |  |  |  |  |
| Large Entity  | Fee               | Small Entity   | Fee             | Fee Description   |                   |                |                 |                 |          |              |     |                 |     |                    |       |     |                                     |     |                    |                   |    |                                     |       |                |                 |                  |                           |                 |      |     |      |   |                        |      |     |      |  |                                   |       |                     |       |   |                                       |     |                 |     |  |   |     |     |     |   |   |                     |     |     |  |     |               |     |     |   |     |      |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |      |     |      |   |     |     |     |    |                                  |     |      |     |     |                                    |     |      |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |                   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |                           |  |  |  |  |
| 105   | 130               | 205            | 65              | Surcharge - late filing fee or oath   |                   |                |                 |                 |          |              |     |                 |     |                    |       |     |                                     |     |                    |                   |    |                                     |       |                |                 |                  |                           |                 |      |     |      |   |                        |      |     |      |  |                                   |       |                     |       |   |                                       |     |                 |     |  |   |     |     |     |   |   |                     |     |     |  |     |               |     |     |   |     |      |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |      |     |      |   |     |     |     |    |                                  |     |      |     |     |                                    |     |      |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |                   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |                           |  |  |  |  |
| 127   | 50                | 227            | 25              | Surcharge - late Provisional filing   |                   |                |                 |                 |          |              |     |                 |     |                    |       |     |                                     |     |                    |                   |    |                                     |       |                |                 |                  |                           |                 |      |     |      |   |                        |      |     |      |  |                                   |       |                     |       |   |                                       |     |                 |     |  |   |     |     |     |   |   |                     |     |     |  |     |               |     |     |   |     |      |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |      |     |      |   |     |     |     |    |                                  |     |      |     |     |                                    |     |      |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |                   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |                           |  |  |  |  |
| 139   | 130               | 139            | 130             | Non-English specification   |                   |                |                 |                 |          |              |     |                 |     |                    |       |     |                                     |     |                    |                   |    |                                     |       |                |                 |                  |                           |                 |      |     |      |   |                        |      |     |      |  |                                   |       |                     |       |   |                                       |     |                 |     |  |   |     |     |     |   |   |                     |     |     |  |     |               |     |     |   |     |      |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |      |     |      |   |     |     |     |    |                                  |     |      |     |     |                                    |     |      |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |                   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |                           |  |  |  |  |
| 147   | 2520              | 147            | 2520            | For filing a request for ex parte Reexamination   |                   |                |                 |                 |          |              |     |                 |     |                    |       |     |                                     |     |                    |                   |    |                                     |       |                |                 |                  |                           |                 |      |     |      |   |                        |      |     |      |  |                                   |       |                     |       |   |                                       |     |                 |     |  |   |     |     |     |   |   |                     |     |     |  |     |               |     |     |   |     |      |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |      |     |      |   |     |     |     |    |                                  |     |      |     |     |                                    |     |      |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |                   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |                           |  |  |  |  |
| 112   | 920*              | 112            | 920*            | Requesting publication of SIR prior to Examiner action  |                   |                |                 |                 |          |              |     |                 |     |                    |       |     |                                     |     |                    |                   |    |                                     |       |                |                 |                  |                           |                 |      |     |      |   |                        |      |     |      |  |                                   |       |                     |       |   |                                       |     |                 |     |  |   |     |     |     |   |   |                     |     |     |  |     |               |     |     |   |     |      |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |      |     |      |   |     |     |     |    |                                  |     |      |     |     |                                    |     |      |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |                   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |                           |  |  |  |  |
| 113   | 1840*             | 113            | 1840*           | Requesting publication of SIR after Examiner action   |                   |                |                 |                 |          |              |     |                 |     |                    |       |     |                                     |     |                    |                   |    |                                     |       |                |                 |                  |                           |                 |      |     |      |   |                        |      |     |      |  |                                   |       |                     |       |   |                                       |     |                 |     |  |   |     |     |     |   |   |                     |     |     |  |     |               |     |     |   |     |      |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |      |     |      |   |     |     |     |    |                                  |     |      |     |     |                                    |     |      |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |                   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |                           |  |  |  |  |
| 115   | 110               | 215            | 55              | Extension for reply within first month  |                   |                |                 |                 |          |              |     |                 |     |                    |       |     |                                     |     |                    |                   |    |                                     |       |                |                 |                  |                           |                 |      |     |      |   |                        |      |     |      |  |                                   |       |                     |       |   |                                       |     |                 |     |  |   |     |     |     |   |   |                     |     |     |  |     |               |     |     |   |     |      |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |      |     |      |   |     |     |     |    |                                  |     |      |     |     |                                    |     |      |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |                   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |                           |  |  |  |  |
| 116   | 400               | 216            | 200             | Extension for reply within second month   |                   |                |                 |                 |          |              |     |                 |     |                    |       |     |                                     |     |                    |                   |    |                                     |       |                |                 |                  |                           |                 |      |     |      |   |                        |      |     |      |  |                                   |       |                     |       |   |                                       |     |                 |     |  |   |     |     |     |   |   |                     |     |     |  |     |               |     |     |   |     |      |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |      |     |      |   |     |     |     |    |                                  |     |      |     |     |                                    |     |      |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |                   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |                           |  |  |  |  |
| 117   | 920               | 217            | 460             | Extension for reply within third month  |                   |                |                 |                 |          |              |     |                 |     |                    |       |     |                                     |     |                    |                   |    |                                     |       |                |                 |                  |                           |                 |      |     |      |   |                        |      |     |      |  |                                   |       |                     |       |   |                                       |     |                 |     |  |   |     |     |     |   |   |                     |     |     |  |     |               |     |     |   |     |      |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |      |     |      |   |     |     |     |    |                                  |     |      |     |     |                                    |     |      |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |                   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |                           |  |  |  |  |
| 118   | 1440              | 218            | 720             | Extension for reply within fourth month   |                   |                |                 |                 |          |              |     |                 |     |                    |       |     |                                     |     |                    |                   |    |                                     |       |                |                 |                  |                           |                 |      |     |      |   |                        |      |     |      |  |                                   |       |                     |       |   |                                       |     |                 |     |  |   |     |     |     |   |   |                     |     |     |  |     |               |     |     |   |     |      |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |      |     |      |   |     |     |     |    |                                  |     |      |     |     |                                    |     |      |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |                   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |                           |  |  |  |  |
| 128   | 1960              | 228            | 980             | Extension for reply within fifth month  |                   |                |                 |                 |          |              |     |                 |     |                    |       |     |                                     |     |                    |                   |    |                                     |       |                |                 |                  |                           |                 |      |     |      |   |                        |      |     |      |  |                                   |       |                     |       |   |                                       |     |                 |     |  |   |     |     |     |   |   |                     |     |     |  |     |               |     |     |   |     |      |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |      |     |      |   |     |     |     |    |                                  |     |      |     |     |                                    |     |      |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |                   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |                           |  |  |  |  |
| 119   | 320               | 219            | 160             | Notice of Appeal  |                   |                |                 |                 |          |              |     |                 |     |                    |       |     |                                     |     |                    |                   |    |                                     |       |                |                 |                  |                           |                 |      |     |      |   |                        |      |     |      |  |                                   |       |                     |       |   |                                       |     |                 |     |  |   |     |     |     |   |   |                     |     |     |  |     |               |     |     |   |     |      |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |      |     |      |   |     |     |     |    |                                  |     |      |     |     |                                    |     |      |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |                   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |                           |  |  |  |  |
| 120   | 320               | 220            | 160             | Filing a brief in support of an appeal  |                   |                |                 |                 |          |              |     |                 |     |                    |       |     |                                     |     |                    |                   |    |                                     |       |                |                 |                  |                           |                 |      |     |      |   |                        |      |     |      |  |                                   |       |                     |       |   |                                       |     |                 |     |  |   |     |     |     |   |   |                     |     |     |  |     |               |     |     |   |     |      |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |      |     |      |   |     |     |     |    |                                  |     |      |     |     |                                    |     |      |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |                   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |                           |  |  |  |  |
| 121   | 280               | 221            | 140             | Request for oral hearing  |                   |                |                 |                 |          |              |     |                 |     |                    |       |     |                                     |     |                    |                   |    |                                     |       |                |                 |                  |                           |                 |      |     |      |   |                        |      |     |      |  |                                   |       |                     |       |   |                                       |     |                 |     |  |   |     |     |     |   |   |                     |     |     |  |     |               |     |     |   |     |      |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |      |     |      |   |     |     |     |    |                                  |     |      |     |     |                                    |     |      |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |                   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |                           |  |  |  |  |
| 138   | 1510              | 138            | 1510            | Petition to institute a public use proceeding   |                   |                |                 |                 |          |              |     |                 |     |                    |       |     |                                     |     |                    |                   |    |                                     |       |                |                 |                  |                           |                 |      |     |      |   |                        |      |     |      |  |                                   |       |                     |       |   |                                       |     |                 |     |  |   |     |     |     |   |   |                     |     |     |  |     |               |     |     |   |     |      |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |      |     |      |   |     |     |     |    |                                  |     |      |     |     |                                    |     |      |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |                   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |                           |  |  |  |  |
| 140   | 110               | 240            | 55              | Petition to revive - unavoidable  |                   |                |                 |                 |          |              |     |                 |     |                    |       |     |                                     |     |                    |                   |    |                                     |       |                |                 |                  |                           |                 |      |     |      |   |                        |      |     |      |  |                                   |       |                     |       |   |                                       |     |                 |     |  |   |     |     |     |   |   |                     |     |     |  |     |               |     |     |   |     |      |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |      |     |      |   |     |     |     |    |                                  |     |      |     |     |                                    |     |      |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |                   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |                           |  |  |  |  |
| 141   | 1280              | 241            | 640             | Petition to revive - unintentional  |                   |                |                 |                 |          |              |     |                 |     |                    |       |     |                                     |     |                    |                   |    |                                     |       |                |                 |                  |                           |                 |      |     |      |   |                        |      |     |      |  |                                   |       |                     |       |   |                                       |     |                 |     |  |   |     |     |     |   |   |                     |     |     |  |     |               |     |     |   |     |      |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |      |     |      |   |     |     |     |    |                                  |     |      |     |     |                                    |     |      |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |                   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |                           |  |  |  |  |
| 142   | 1280              | 242            | 640             | Utility issue fee (or reissue)  |                   |                |                 |                 |          |              |     |                 |     |                    |       |     |                                     |     |                    |                   |    |                                     |       |                |                 |                  |                           |                 |      |     |      |   |                        |      |     |      |  |                                   |       |                     |       |   |                                       |     |                 |     |  |   |     |     |     |   |   |                     |     |     |  |     |               |     |     |   |     |      |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |      |     |      |   |     |     |     |    |                                  |     |      |     |     |                                    |     |      |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |                   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |                           |  |  |  |  |
| 143   | 460               | 243            | 230             | Design issue fee  |                   |                |                 |                 |          |              |     |                 |     |                    |       |     |                                     |     |                    |                   |    |                                     |       |                |                 |                  |                           |                 |      |     |      |   |                        |      |     |      |  |                                   |       |                     |       |   |                                       |     |                 |     |  |   |     |     |     |   |   |                     |     |     |  |     |               |     |     |   |     |      |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |      |     |      |   |     |     |     |    |                                  |     |      |     |     |                                    |     |      |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |                   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |                           |  |  |  |  |
| 144   | 620               | 244            | 310             | Plant issue fee   |                   |                |                 |                 |          |              |     |                 |     |                    |       |     |                                     |     |                    |                   |    |                                     |       |                |                 |                  |                           |                 |      |     |      |   |                        |      |     |      |  |                                   |       |                     |       |   |                                       |     |                 |     |  |   |     |     |     |   |   |                     |     |     |  |     |               |     |     |   |     |      |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |      |     |      |   |     |     |     |    |                                  |     |      |     |     |                                    |     |      |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |                   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |                           |  |  |  |  |
| 122   | 130               | 122            | 130             | Petitions to the Commissioner   |                   |                |                 |                 |          |              |     |                 |     |                    |       |     |                                     |     |                    |                   |    |                                     |       |                |                 |                  |                           |                 |      |     |      |   |                        |      |     |      |  |                                   |       |                     |       |   |                                       |     |                 |     |  |   |     |     |     |   |   |                     |     |     |  |     |               |     |     |   |     |      |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |      |     |      |   |     |     |     |    |                                  |     |      |     |     |                                    |     |      |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |                   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |                           |  |  |  |  |
| 123   | 50                | 123            | 50              | Processing fee under 37 CFR 1.17(q)   |                   |                |                 |                 |          |              |     |                 |     |                    |       |     |                                     |     |                    |                   |    |                                     |       |                |                 |                  |                           |                 |      |     |      |   |                        |      |     |      |  |                                   |       |                     |       |   |                                       |     |                 |     |  |   |     |     |     |   |   |                     |     |     |  |     |               |     |     |   |     |      |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |      |     |      |   |     |     |     |    |                                  |     |      |     |     |                                    |     |      |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |                   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |                           |  |  |  |  |
| 126   | 180               | 126            | 180             | Submission of IDS   |                   |                |                 |                 |          |              |     |                 |     |                    |       |     |                                     |     |                    |                   |    |                                     |       |                |                 |                  |                           |                 |      |     |      |   |                        |      |     |      |  |                                   |       |                     |       |   |                                       |     |                 |     |  |   |     |     |     |   |   |                     |     |     |  |     |               |     |     |   |     |      |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |      |     |      |   |     |     |     |    |                                  |     |      |     |     |                                    |     |      |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |                   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |                           |  |  |  |  |
| 581   | 40                | 581            | 40              | Recording each patent assignment per property (times number of properties)  |                   |                |                 |                 |          |              |     |                 |     |                    |       |     |                                     |     |                    |                   |    |                                     |       |                |                 |                  |                           |                 |      |     |      |   |                        |      |     |      |  |                                   |       |                     |       |   |                                       |     |                 |     |  |   |     |     |     |   |   |                     |     |     |  |     |               |     |     |   |     |      |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |      |     |      |   |     |     |     |    |                                  |     |      |     |     |                                    |     |      |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |                   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |                           |  |  |  |  |
| 146   | 740               | 246            | 370             | Filing a submission after final rejection (37 CFR § 1.129(a))   |                   |                |                 |                 |          |              |     |                 |     |                    |       |     |                                     |     |                    |                   |    |                                     |       |                |                 |                  |                           |                 |      |     |      |   |                        |      |     |      |  |                                   |       |                     |       |   |                                       |     |                 |     |  |   |     |     |     |   |   |                     |     |     |  |     |               |     |     |   |     |      |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |      |     |      |   |     |     |     |    |                                  |     |      |     |     |                                    |     |      |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |                   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |                           |  |  |  |  |
| 149   | 740               | 249            | 370             | For each additional invention to be examined (37 CFR § 1.129(b))  |                   |                |                 |                 |          |              |     |                 |     |                    |       |     |                                     |     |                    |                   |    |                                     |       |                |                 |                  |                           |                 |      |     |      |   |                        |      |     |      |  |                                   |       |                     |       |   |                                       |     |                 |     |  |   |     |     |     |   |   |                     |     |     |  |     |               |     |     |   |     |      |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |      |     |      |   |     |     |     |    |                                  |     |      |     |     |                                    |     |      |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |                   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |                           |  |  |  |  |
| 179   | 740               | 279            | 370             | Request for Continued Examination (RCE)   |                   |                |                 |                 |          |              |     |                 |     |                    |       |     |                                     |     |                    |                   |    |                                     |       |                |                 |                  |                           |                 |      |     |      |   |                        |      |     |      |  |                                   |       |                     |       |   |                                       |     |                 |     |  |   |     |     |     |   |   |                     |     |     |  |     |               |     |     |   |     |      |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |      |     |      |   |     |     |     |    |                                  |     |      |     |     |                                    |     |      |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |                   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |                           |  |  |  |  |
| 169   | 900               | 169            | 900             | Request for expedited examination of a design application   |                   |                |                 |                 |          |              |     |                 |     |                    |       |     |                                     |     |                    |                   |    |                                     |       |                |                 |                  |                           |                 |      |     |      |   |                        |      |     |      |  |                                   |       |                     |       |   |                                       |     |                 |     |  |   |     |     |     |   |   |                     |     |     |  |     |               |     |     |   |     |      |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |      |     |      |   |     |     |     |    |                                  |     |      |     |     |                                    |     |      |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |                   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |                           |  |  |  |  |
| Other fee (specify) _____   |                   |                |                 |   |                   |                |                 |                 |          |              |     |                 |     |                    |       |     |                                     |     |                    |                   |    |                                     |       |                |                 |                  |                           |                 |      |     |      |   |                        |      |     |      |  |                                   |       |                     |       |   |                                       |     |                 |     |  |   |     |     |     |   |   |                     |     |     |  |     |               |     |     |   |     |      |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |      |     |      |   |     |     |     |    |                                  |     |      |     |     |                                    |     |      |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |                   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |                           |  |  |  |  |
| <b>FEE CALCULATION</b><br>1. BASIC FILING FEE<br><table border="1"> <thead> <tr> <th>Large Fee Code</th> <th>Entity Fee (\$)</th> <th>Small Fee Code</th> <th>Entity Fee (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>101</td><td>750</td><td>201</td><td>375</td><td>Utility filing fee</td><td>\$750</td></tr> <tr><td>106</td><td>330</td><td>206</td><td>165</td><td>Design filing fee</td><td></td></tr> <tr><td>107</td><td>510</td><td>207</td><td>255</td><td>Plant filing fee</td><td></td></tr> <tr><td>108</td><td>740</td><td>208</td><td>370</td><td>Reissue filing fee</td><td></td></tr> <tr><td>114</td><td>160</td><td>214</td><td>80</td><td>Provisional filing fee</td><td></td></tr> <tr><td colspan="5"><b>SUBTOTAL (1)</b></td><td><b>(\$) 750</b></td></tr> </tbody> </table>   |                   |                |                 | Large Fee Code  | Entity Fee (\$)   | Small Fee Code | Entity Fee (\$) | Fee Description | Fee Paid | 101          | 750 | 201             | 375 | Utility filing fee | \$750 | 106 | 330                                 | 206 | 165                | Design filing fee |    | 107                                 | 510   | 207            | 255             | Plant filing fee |                           | 108             | 740  | 208 | 370  | Reissue filing fee                              |                        | 114  | 160 | 214  | 80   | Provisional filing fee            |       | <b>SUBTOTAL (1)</b> |       |   |                                       |     | <b>(\$) 750</b> |     |  |   |     |     |     |   |   |                     |     |     |  |     |               |     |     |   |     |      |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |      |     |      |   |     |     |     |    |                                  |     |      |     |     |                                    |     |      |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |                   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |                           |  |  |  |  |
| Large Fee Code  | Entity Fee (\$)   | Small Fee Code | Entity Fee (\$) | Fee Description   | Fee Paid          |                |                 |                 |          |              |     |                 |     |                    |       |     |                                     |     |                    |                   |    |                                     |       |                |                 |                  |                           |                 |      |     |      |   |                        |      |     |      |  |                                   |       |                     |       |   |                                       |     |                 |     |  |   |     |     |     |   |   |                     |     |     |  |     |               |     |     |   |     |      |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |      |     |      |   |     |     |     |    |                                  |     |      |     |     |                                    |     |      |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |                   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |                           |  |  |  |  |
| 101   | 750               | 201            | 375             | Utility filing fee  | \$750             |                |                 |                 |          |              |     |                 |     |                    |       |     |                                     |     |                    |                   |    |                                     |       |                |                 |                  |                           |                 |      |     |      |   |                        |      |     |      |  |                                   |       |                     |       |   |                                       |     |                 |     |  |   |     |     |     |   |   |                     |     |     |  |     |               |     |     |   |     |      |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |      |     |      |   |     |     |     |    |                                  |     |      |     |     |                                    |     |      |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |                   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |                           |  |  |  |  |
| 106   | 330               | 206            | 165             | Design filing fee   |                   |                |                 |                 |          |              |     |                 |     |                    |       |     |                                     |     |                    |                   |    |                                     |       |                |                 |                  |                           |                 |      |     |      |   |                        |      |     |      |  |                                   |       |                     |       |   |                                       |     |                 |     |  |   |     |     |     |   |   |                     |     |     |  |     |               |     |     |   |     |      |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |      |     |      |   |     |     |     |    |                                  |     |      |     |     |                                    |     |      |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |                   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |                           |  |  |  |  |
| 107   | 510               | 207            | 255             | Plant filing fee  |                   |                |                 |                 |          |              |     |                 |     |                    |       |     |                                     |     |                    |                   |    |                                     |       |                |                 |                  |                           |                 |      |     |      |   |                        |      |     |      |  |                                   |       |                     |       |   |                                       |     |                 |     |  |   |     |     |     |   |   |                     |     |     |  |     |               |     |     |   |     |      |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |      |     |      |   |     |     |     |    |                                  |     |      |     |     |                                    |     |      |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |                   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |                           |  |  |  |  |
| 108   | 740               | 208            | 370             | Reissue filing fee  |                   |                |                 |                 |          |              |     |                 |     |                    |       |     |                                     |     |                    |                   |    |                                     |       |                |                 |                  |                           |                 |      |     |      |   |                        |      |     |      |  |                                   |       |                     |       |   |                                       |     |                 |     |  |   |     |     |     |   |   |                     |     |     |  |     |               |     |     |   |     |      |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |      |     |      |   |     |     |     |    |                                  |     |      |     |     |                                    |     |      |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |                   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |                           |  |  |  |  |
| 114   | 160               | 214            | 80              | Provisional filing fee  |                   |                |                 |                 |          |              |     |                 |     |                    |       |     |                                     |     |                    |                   |    |                                     |       |                |                 |                  |                           |                 |      |     |      |   |                        |      |     |      |  |                                   |       |                     |       |   |                                       |     |                 |     |  |   |     |     |     |   |   |                     |     |     |  |     |               |     |     |   |     |      |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |      |     |      |   |     |     |     |    |                                  |     |      |     |     |                                    |     |      |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |                   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |                           |  |  |  |  |
| <b>SUBTOTAL (1)</b>   |                   |                |                 |   | <b>(\$) 750</b>   |                |                 |                 |          |              |     |                 |     |                    |       |     |                                     |     |                    |                   |    |                                     |       |                |                 |                  |                           |                 |      |     |      |   |                        |      |     |      |  |                                   |       |                     |       |   |                                       |     |                 |     |  |   |     |     |     |   |   |                     |     |     |  |     |               |     |     |   |     |      |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |      |     |      |   |     |     |     |    |                                  |     |      |     |     |                                    |     |      |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |                   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |                           |  |  |  |  |
| 2. EXTRA CLAIM FEES<br><table border="1"> <thead> <tr> <th>Total Claims</th> <th>Previously Paid**</th> <th>Extra Claims</th> <th>Fee from below</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>19</td> <td>20</td> <td>0</td> <td>18</td> <td></td> </tr> <tr> <td>Independent Claims</td> <td>3</td> <td>3</td> <td>84</td> <td></td> </tr> <tr> <td colspan="4">Multiple Dependent</td> <td>280 =</td> </tr> </tbody> </table><br><table border="1"> <thead> <tr> <th>Large Fee Code</th> <th>Entity Fee (\$)</th> <th>Small Fee Code</th> <th>Entity Fee (\$)</th> <th>Fee Description</th> </tr> </thead> <tbody> <tr><td>103</td><td>18</td><td>203</td><td>9</td><td>Claims in excess of 20</td></tr> <tr><td>102</td><td>84</td><td>202</td><td>42</td><td>Independent claims in excess of 3</td></tr> <tr><td>104</td><td>280</td><td>204</td><td>140</td><td>Multiple dependent claim, if not paid</td></tr> <tr><td>109</td><td>84</td><td>209</td><td>42</td><td>* Reissue independent claims over original patent</td></tr> <tr><td>110</td><td>18</td><td>210</td><td>9</td><td>* Reissue claims in excess of 20 and over original patent</td></tr> <tr><td colspan="5"><b>SUBTOTAL (2)</b></td><td><b>(\$) 0</b></td></tr> </tbody> </table> |                   |                |                 | Total Claims  | Previously Paid** | Extra Claims   | Fee from below  | Fee Paid        | 19       | 20           | 0   | 18              |     | Independent Claims | 3     | 3   | 84                                  |     | Multiple Dependent |                   |    |                                     | 280 = | Large Fee Code | Entity Fee (\$) | Small Fee Code   | Entity Fee (\$)           | Fee Description | 103  | 18  | 203  | 9   | Claims in excess of 20 | 102  | 84  | 202  | 42   | Independent claims in excess of 3 | 104   | 280                 | 204   | 140   | Multiple dependent claim, if not paid | 109 | 84              | 209 | 42                                     | * Reissue independent claims over original patent | 110 | 18  | 210 | 9                                       | * Reissue claims in excess of 20 and over original patent | <b>SUBTOTAL (2)</b> |     |     |  |     | <b>(\$) 0</b> |     |     |   |     |      |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |      |     |      |   |     |     |     |    |                                  |     |      |     |     |                                    |     |      |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |                   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |                           |  |  |  |  |
| Total Claims  | Previously Paid** | Extra Claims   | Fee from below  | Fee Paid  |                   |                |                 |                 |          |              |     |                 |     |                    |       |     |                                     |     |                    |                   |    |                                     |       |                |                 |                  |                           |                 |      |     |      |   |                        |      |     |      |  |                                   |       |                     |       |   |                                       |     |                 |     |  |   |     |     |     |   |   |                     |     |     |  |     |               |     |     |   |     |      |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |      |     |      |   |     |     |     |    |                                  |     |      |     |     |                                    |     |      |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |                   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |                           |  |  |  |  |
| 19  | 20                | 0              | 18              |   |                   |                |                 |                 |          |              |     |                 |     |                    |       |     |                                     |     |                    |                   |    |                                     |       |                |                 |                  |                           |                 |      |     |      |   |                        |      |     |      |  |                                   |       |                     |       |   |                                       |     |                 |     |  |   |     |     |     |   |   |                     |     |     |  |     |               |     |     |   |     |      |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |      |     |      |   |     |     |     |    |                                  |     |      |     |     |                                    |     |      |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |                   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |                           |  |  |  |  |
| Independent Claims  | 3                 | 3              | 84              |   |                   |                |                 |                 |          |              |     |                 |     |                    |       |     |                                     |     |                    |                   |    |                                     |       |                |                 |                  |                           |                 |      |     |      |   |                        |      |     |      |  |                                   |       |                     |       |   |                                       |     |                 |     |  |   |     |     |     |   |   |                     |     |     |  |     |               |     |     |   |     |      |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |      |     |      |   |     |     |     |    |                                  |     |      |     |     |                                    |     |      |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |                   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |                           |  |  |  |  |
| Multiple Dependent  |                   |                |                 | 280 =   |                   |                |                 |                 |          |              |     |                 |     |                    |       |     |                                     |     |                    |                   |    |                                     |       |                |                 |                  |                           |                 |      |     |      |   |                        |      |     |      |  |                                   |       |                     |       |   |                                       |     |                 |     |  |   |     |     |     |   |   |                     |     |     |  |     |               |     |     |   |     |      |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |      |     |      |   |     |     |     |    |                                  |     |      |     |     |                                    |     |      |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |                   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |                           |  |  |  |  |
| Large Fee Code  | Entity Fee (\$)   | Small Fee Code | Entity Fee (\$) | Fee Description   |                   |                |                 |                 |          |              |     |                 |     |                    |       |     |                                     |     |                    |                   |    |                                     |       |                |                 |                  |                           |                 |      |     |      |   |                        |      |     |      |  |                                   |       |                     |       |   |                                       |     |                 |     |  |   |     |     |     |   |   |                     |     |     |  |     |               |     |     |   |     |      |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |      |     |      |   |     |     |     |    |                                  |     |      |     |     |                                    |     |      |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |                   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |                           |  |  |  |  |
| 103   | 18                | 203            | 9               | Claims in excess of 20  |                   |                |                 |                 |          |              |     |                 |     |                    |       |     |                                     |     |                    |                   |    |                                     |       |                |                 |                  |                           |                 |      |     |      |   |                        |      |     |      |  |                                   |       |                     |       |   |                                       |     |                 |     |  |   |     |     |     |   |   |                     |     |     |  |     |               |     |     |   |     |      |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |      |     |      |   |     |     |     |    |                                  |     |      |     |     |                                    |     |      |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |                   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |                           |  |  |  |  |
| 102   | 84                | 202            | 42              | Independent claims in excess of 3   |                   |                |                 |                 |          |              |     |                 |     |                    |       |     |                                     |     |                    |                   |    |                                     |       |                |                 |                  |                           |                 |      |     |      |   |                        |      |     |      |  |                                   |       |                     |       |   |                                       |     |                 |     |  |   |     |     |     |   |   |                     |     |     |  |     |               |     |     |   |     |      |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |      |     |      |   |     |     |     |    |                                  |     |      |     |     |                                    |     |      |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |                   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |                           |  |  |  |  |
| 104   | 280               | 204            | 140             | Multiple dependent claim, if not paid   |                   |                |                 |                 |          |              |     |                 |     |                    |       |     |                                     |     |                    |                   |    |                                     |       |                |                 |                  |                           |                 |      |     |      |   |                        |      |     |      |  |                                   |       |                     |       |   |                                       |     |                 |     |  |   |     |     |     |   |   |                     |     |     |  |     |               |     |     |   |     |      |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |      |     |      |   |     |     |     |    |                                  |     |      |     |     |                                    |     |      |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |                   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |                           |  |  |  |  |
| 109   | 84                | 209            | 42              | * Reissue independent claims over original patent   |                   |                |                 |                 |          |              |     |                 |     |                    |       |     |                                     |     |                    |                   |    |                                     |       |                |                 |                  |                           |                 |      |     |      |   |                        |      |     |      |  |                                   |       |                     |       |   |                                       |     |                 |     |  |   |     |     |     |   |   |                     |     |     |  |     |               |     |     |   |     |      |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |      |     |      |   |     |     |     |    |                                  |     |      |     |     |                                    |     |      |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |                   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |                           |  |  |  |  |
| 110   | 18                | 210            | 9               | * Reissue claims in excess of 20 and over original patent   |                   |                |                 |                 |          |              |     |                 |     |                    |       |     |                                     |     |                    |                   |    |                                     |       |                |                 |                  |                           |                 |      |     |      |   |                        |      |     |      |  |                                   |       |                     |       |   |                                       |     |                 |     |  |   |     |     |     |   |   |                     |     |     |  |     |               |     |     |   |     |      |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |      |     |      |   |     |     |     |    |                                  |     |      |     |     |                                    |     |      |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |                   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |                           |  |  |  |  |
| <b>SUBTOTAL (2)</b>   |                   |                |                 |   | <b>(\$) 0</b>     |                |                 |                 |          |              |     |                 |     |                    |       |     |                                     |     |                    |                   |    |                                     |       |                |                 |                  |                           |                 |      |     |      |   |                        |      |     |      |  |                                   |       |                     |       |   |                                       |     |                 |     |  |   |     |     |     |   |   |                     |     |     |  |     |               |     |     |   |     |      |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |      |     |      |   |     |     |     |    |                                  |     |      |     |     |                                    |     |      |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |                   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |                           |  |  |  |  |
| **OR NUMBER PREVIOUSLY PAID, IF GREATER THAN STANDARD ALLOWANCE.<br>*For Reissues, see above  |                   |                |                 | * Reduced by Basic Filing Fee paid <b>SUBTOTAL (3)</b> <b>(\$) 40</b>   |                   |                |                 |                 |          |              |     |                 |     |                    |       |     |                                     |     |                    |                   |    |                                     |       |                |                 |                  |                           |                 |      |     |      |   |                        |      |     |      |  |                                   |       |                     |       |   |                                       |     |                 |     |  |   |     |     |     |   |   |                     |     |     |  |     |               |     |     |   |     |      |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |      |     |      |   |     |     |     |    |                                  |     |      |     |     |                                    |     |      |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |                   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |                           |  |  |  |  |
| <b>SUBMITTED BY</b><br>Name (Print/Type) <u>Karin L. Williams</u><br>Signature <u>Karin L. Williams</u>   |                   |                |                 | <b>Complete (if applicable)</b><br>Registration No. <u>36,721</u> Telephone <u>908-518-7700</u><br>Date <u>8/21/03</u>  |                   |                |                 |                 |          |              |     |                 |     |                    |       |     |                                     |     |                    |                   |    |                                     |       |                |                 |                  |                           |                 |      |     |      |   |                        |      |     |      |  |                                   |       |                     |       |   |                                       |     |                 |     |  |   |     |     |     |   |   |                     |     |     |  |     |               |     |     |   |     |      |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |      |     |      |   |     |     |     |    |                                  |     |      |     |     |                                    |     |      |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |                   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |                           |  |  |  |  |

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| <b>CERTIFICATE OF MAILING BY "EXPRESS MAIL" (37 CFR 1.10)</b>  |                               |                        | Docket No.                   |
| Applicant(s): Jon Claude Russell Bennett   |                               |                        | D3056A                       |
| Serial No.<br>Unassigned   | Filing Date<br>Filed Herewith | Examiner<br>Unassigned | Group Art Unit<br>Unassigned |
| Invention: <b>METHOD AND APPARATUS FOR TESTING AN IP NETWORK</b>   |                               |                        |                              |
| <p>I hereby certify that the following correspondence:</p> <div style="border: 1px solid black; padding: 10px; margin: 10px 0;"><b>New U.S. Patent Application</b></div> <p style="text-align: center;"><i>(Identify type of correspondence)</i></p> <p>is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on</p> <p style="text-align: center;"><u>8/25/03</u><br/><i>(Date)</i></p> <div style="text-align: right; margin-top: 20px;"><u>Marjorie Scariati</u><br/><i>(Typed or Printed Name of Person Mailing Correspondence)</i></div> <div style="text-align: right; margin-top: 10px;"><u></u><br/><i>(Signature of Person Mailing Correspondence)</i></div> <div style="text-align: right; margin-top: 10px;"><u>ER 195969943 US</u><br/><i>("Express Mail" Mailing Label Number)</i></div> |                               |                        |                              |
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